

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		2-10-00
O.I.P.E. CLASSIFIER		72	18-00
FORMALITY REVIEW		65955	8/11
RESPONSE FORMALITY REVIEW			

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### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 +/- ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1			
2	✓		
3	✓		
4	0		
5	0		
6	✓		
7	✓		
8	✓		
9	✓		
10	0		
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If more than 150 claims or 10 actions  
staple additional sheet here

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